

Name
in
Full

Susan M. Adams

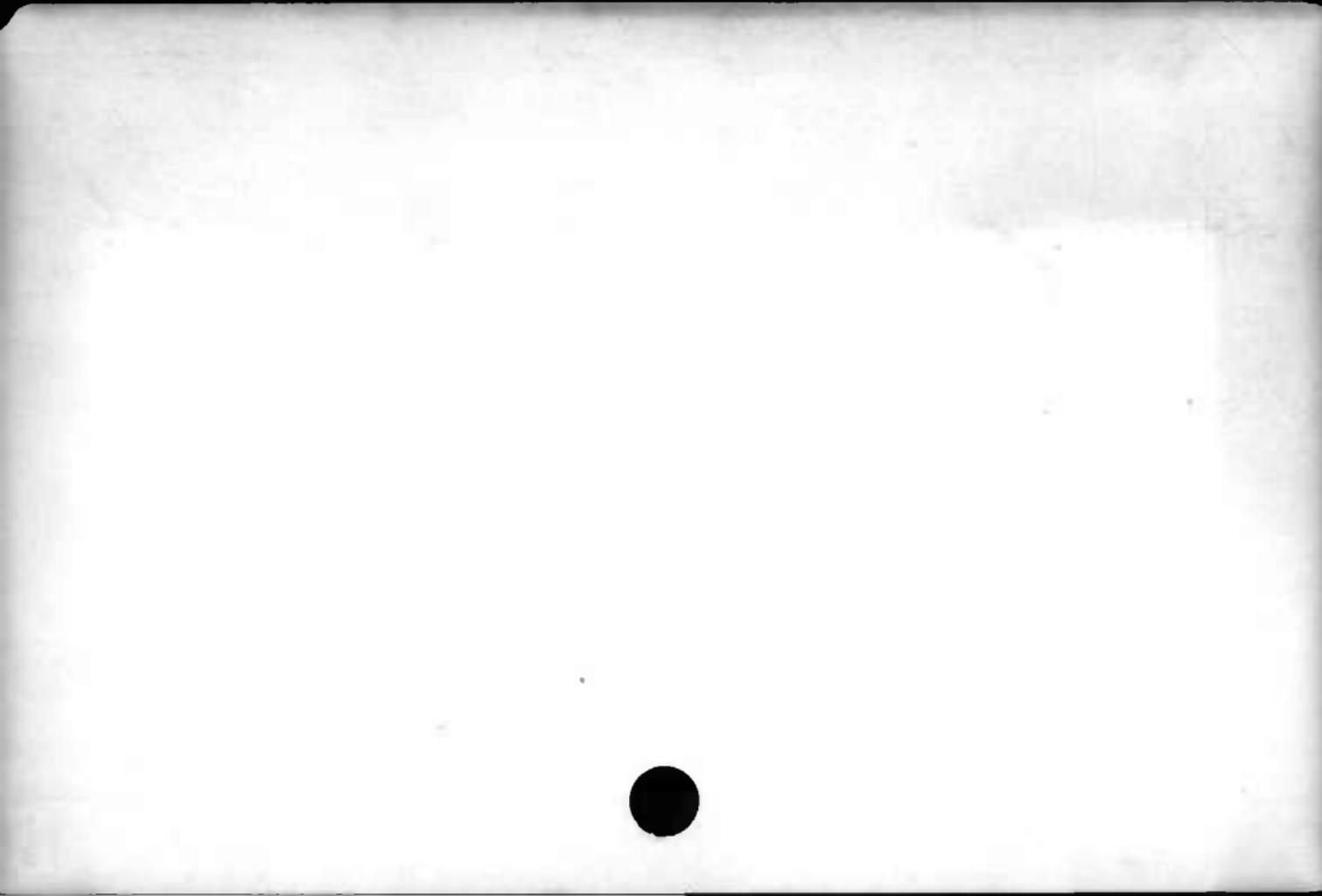
CERTIFICATE OF DEATH

TO BE ANSWERED BY
NEAREST FRIEND

Died at		Town	County		MARYLAND							
Died at	Cambridge	County	Baltimore		MARYLAND							
Date of death	1907	Month	Aug	Day	19	Years	0	Months	0	Days	28	
Sex	Female	Color or Race	white		Birth-place	Cambridge Md						
Married, Single or Widowed	—	Occupation		—								
Name of Wife or Husband												
Father's Name	Sidney A. Adams					Father's Birthplace	Md					
Mother's Maiden Name	Alvina F. Morris					Mother's Birthplace	Md					
Name of person giving information	Alvina F. Adams					How related to deceased	Mother					

CAUSES OF DEATH

Primary	Chronic Enteritis	105	How long	3 mos	
	Exhaustion		How long		
Immediate					
Are the name, age, sex, color, date and place correctly given above?	Yea	Signature of Physician	Mary Smith		
		Address	Cambridge Md		
Accident or Suicide?					



Sarah Linda Boyan

Died at Town Cambridge County Dorchester MARYLAND

Date 1902	Month 9	Day 24	Age 15	Y. M. D.	Native of Md	Occupation Cleric
<u>Male</u>	White	Married		<u>Widow</u>	<u>Divorced</u>	
Female	Colored	Single		<u>Widower</u>	Number of children living	

Husband of

Wife

Father's Name

Charles Kerr

Mother's Maiden Name

Bertha Boyan.

Cause of Death

Primary Enterico-Colitis

How long sick

Death

Immediate Exhaustion

105

Accident, Suicide, Homicide

Reported by

E. Wolff M.D.

Address

Cambridge, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Margaret Ann Burton

Town

County

Died at

Madison

MARYLAND

Month Day

Y. M. D.

Native of

Occupation

Date 1902

Sept. 29th

Age 48-9-10

Maryland

Housewife

~~Alien~~

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

12

Husband of

Samuel H. Burton

Wife

Father's

Name

Henry Thomas

Mother's

Elizabeth Thomas

Cause of

Primary

Phthisis pulmonalis

How long sick

9 mos.

Death

Immediate

Accident, Suicide, Homicide

Reported by

R. L. Gauthier, M.D.

Address

Church Creek, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

1



Martha Camper

(Town)

Venura

(County)

Baltimore

MARYLAND

Died at

Month

Day

Y.

M.

D.

Native of

Occupation

Date 1902

9 28

24

J-12

Maryland

Housewife

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

One

Husband of

Wife

Father's

Name

Audreia Camper

Mother's

Maiden Name

Bucca Carr.

Cause of

Primary

Dread Fetus.

How long sick

3d 48 hours.

Death

Immediate

Rupture of uterus. Septicemia.

Accident, Suicide, Homicide

Reported by

F N. Tanner MD

Address

Venura Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Mary Cephus ✓

Town Cambridge County Dorchester MARYLAND

Died at

Date 1902

Month 9

Day 5

Y. 34

M.

D.

Native of Md.

Occupation Housework

~~Male~~

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living 9

Husband

Perry Cephus deceased

Wife

Father's

Name

Mother's

Maiden Name

Cause of

Primary

Bright Disease

How long sick

about 1 year

Death

Immediate

Heart Failure

Accident, Suicide, Homicide

Reported by

E. E. Wolff M.D. / 20

Address

Cambridge, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Clarie Dennis

Town

County

MARYLAND

Died at

Hawkeye Worcester

Date 19

02

Month Day

Y. M. D.

Native of

Occupation

Male

Woman

Age 26
Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband of

Wife

Father's

Name

Mother's
Maiden Name

May Dennis

Cause of

Primary

How long sick

Death

Immediate

Accident, Suicide, Homicide

Reported by

A. G. Smith

Address

Berea



Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name
In
Full

Lewis Days

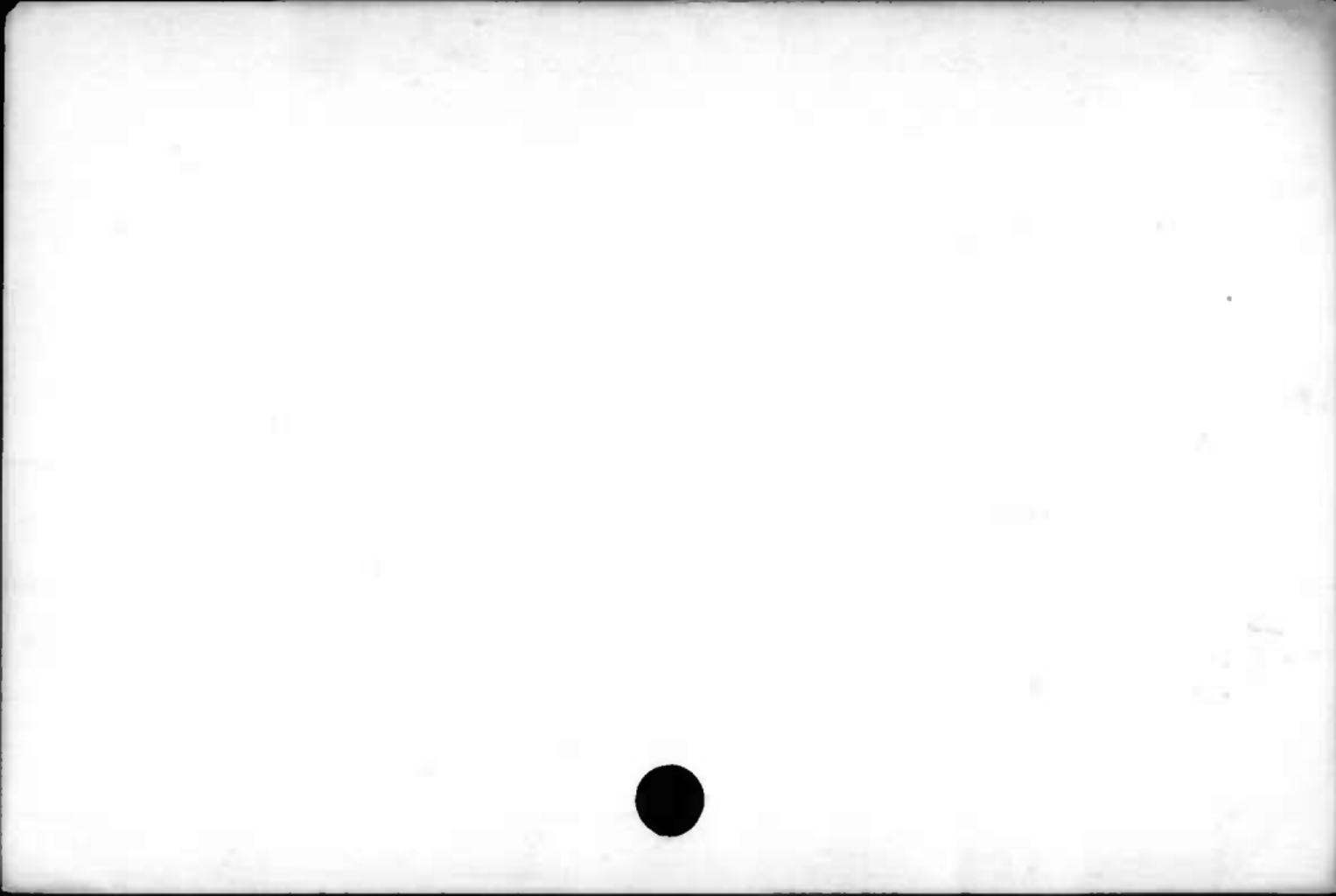
CERTIFICATE OF DEATH

TO BE ANSWERED BY
NEAREST FRIEND

Died at	Town	County			MARYLAND	
Died at	Cambridge	Worcester				
Date of death 1902	Month 9	Day 6	Age 70	Years	Months	Days
Sex	male	Color or Race	Colonel	Birth- place	Md	
Married, Single or Widowed	Married	Occupation	Wood Sawyer			
Name of Wife or Husband	Julia Bryan					
Father's Name	Harry Days					
Mother's Maiden Name	Dollie Days					
Name of person giving Information	Harry Days					

CAUSES OF DEATH

Primary	Chronic Diarrhoea	10	How long about 2 months
Immediate	Exhaustion		How long
Are the name, age, sex, color, date and place correctly given above?		Yes	Signature of Physician
			Address
Accident or Suicide?			



Name
in
Full

~~Edwin Edwin Henry Hoggett~~

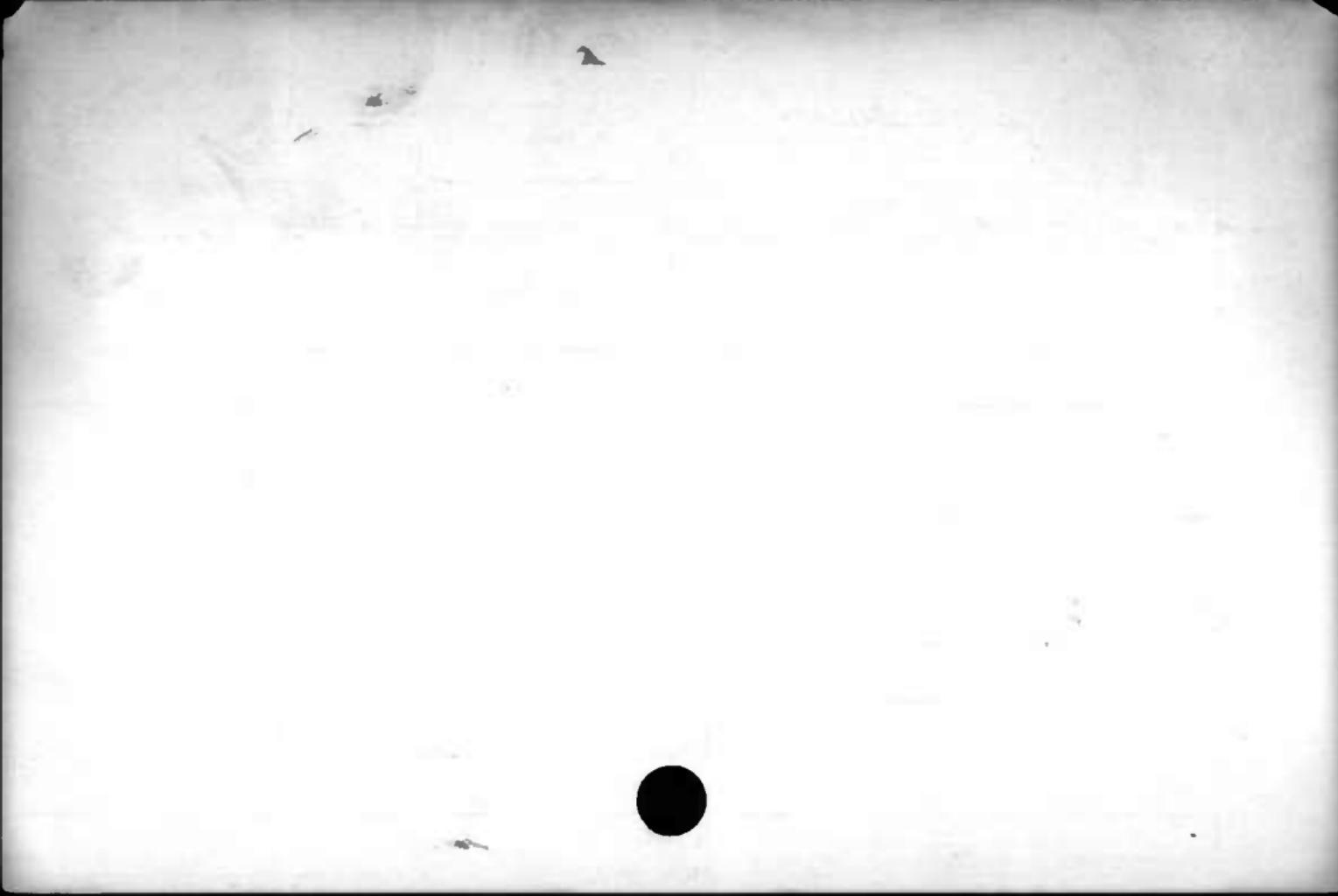
CERTIFICATE OF DEATH

TO BE ANSWERED BY
NEAREST FRIEND

Town Died at	Thompson Station	County Buckingham	MARYLAND		
Date of death 1902	Month Sept	Day 16	Years Age 58.	Months	Days
Sex Male	Color or Race white	Birth- place Maine			
Married, Single or Widowed Married	Occupation Farmer				
Name of wife or Husband Mary Francis Billups					
Father's Name Ebenezer Hoggett	Father's Birthplace Maine				
Mother's Maiden Name Sarah Beamer	Mother's Birthplace Maine				
Name of person giving Information Era S. Hoggett	How related to deceased Daughter				

CAUSES OF DEATH

Primary Sliced by locomotive 166	How long
Immediate fracture skull gravely crushed	How long immediate
Are the name, age, sex, color, date and place correctly given above? yes	Signature of Physician Guy Steele
Address Cambridge Md	
Accident or Suicide? accident	



Name In Full

Certificate of Death

Mary Hooker Hooker

Died at Madison, Maryland MARYLAND
 Date 1902, Sept. 23, Y. M. D. Native of Maryland Occupation
 MS. Female White Colored Age 88 - - Widower Other
 Number of children living 2

Husband of

Wife

Father's

Name

Mother's
Maiden Name

Cromwell

Cause of

Death

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

Primary Old age 54. How long sick 10 months
 Immediate General debility - Accident, Suicide, Homicide
 O.C. Maguire MD
 church creek Md



Isabel Horseman

Town

County

MARYLAND

Died at

Taylor's Island

Dorchester

Month

Day

Y.

M.

D.

Native of

Date 19

02

Sept. 24

Age

56 —

Ind

Occupation

Domestic

Male

White

Age

56 —

Married

Widow

Divorced

Female

Colored

Married

Widow

Number of children living

10

Husband

of

Wife

Father's

Name

Mother's

Maiden Name

Cause of

Primary

Pulmonary Tuberculosis

How long sick

10 yrs

Death

Immediate

Exhaustion

Accident, Suicide, Homicide

Reported by

Dr. Joz. K. Shriver Jr.

Address

Taylor's Isl. [Redacted] Dor. Co. Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Willis Fawr Hughes

Died at	Town Cambridge	County Dorchester	MARYLAND
Date 1962	Month Sept.	Day 1	Y. M. D.
	Year 1962		Native of
Female	Colored	Married	Occupation House work -
Husband of		Single	Widow
Wife			Widower
Father's Name	Josiah Hughes	Mother's Maiden Name	Josephine Chase
Cause of Death	Primary Pulmonary tuberculosis	How long sick $\frac{1}{2}$ years	
Death	Immediate	22	Accident, Suicide, Homicide

Reported by Wilbur A. Draper M.D.
Address Cambridge [redacted] Dorchester Co.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



<i>Infant Jenifer</i>				
Town <i>Taylor's Island.</i>	County <i>Dorchester.</i>	MARYLAND		
Died at	Month <i>Sept.</i>	Day <i>2</i>	Y. M. D.	
Date 1902			<i>1-10</i>	Native of <i>Md.</i>
Male	Age -	Female	Occupation	
White	Married	Colored		
	Single			
Husband of	Widow	Widower	Number of children living	
Wife				
Father's Name	<i>Steve Jenifer</i>	Mother's Maiden Name	<i>Sarah L. Cornish</i>	
Cause of Death	Primary <i>Pertussis</i>	How long sick <i>8 weeks</i>		
	Immediate <i>Exhaustion</i>		- <u>Accident, Suicide, Homicide</u>	
Reported by	<i>Dr. Jor. K. Shriver, Jr.</i>			
Address	<i>Taylor's Island. Dor Co. Md.</i>			

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name
in
Full

Minnie Virginia Jenkins

CERTIFICATE OF DEATH

To BE ANSWERED BY
NEAREST FRIEND

Town Died at Cambridge	County Dorchester	MARYLAND		
Date of death 1907	Month Sep	Day 27	Age 1	Years Months 1
Sex Female	Color or Race Colored	Birth-place Cambridge and		
Married, Single or Widowed Single	Occupation none			
Name of Wife or Husband _____				
Father's Name Mammy Jenkins				Father's Birthplace 15 N. Co and
Mother's Maiden Name Corine Fletcher				Mother's Birthplace DR CO and
Name of person giving Information Dr. D. Fletcher				How related to deceased Uncle

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary

Gastroenteritis

How long
3 months

Immediate

Exhaustion

How long

Are the name, age, sex, color, date
and place correctly given above?

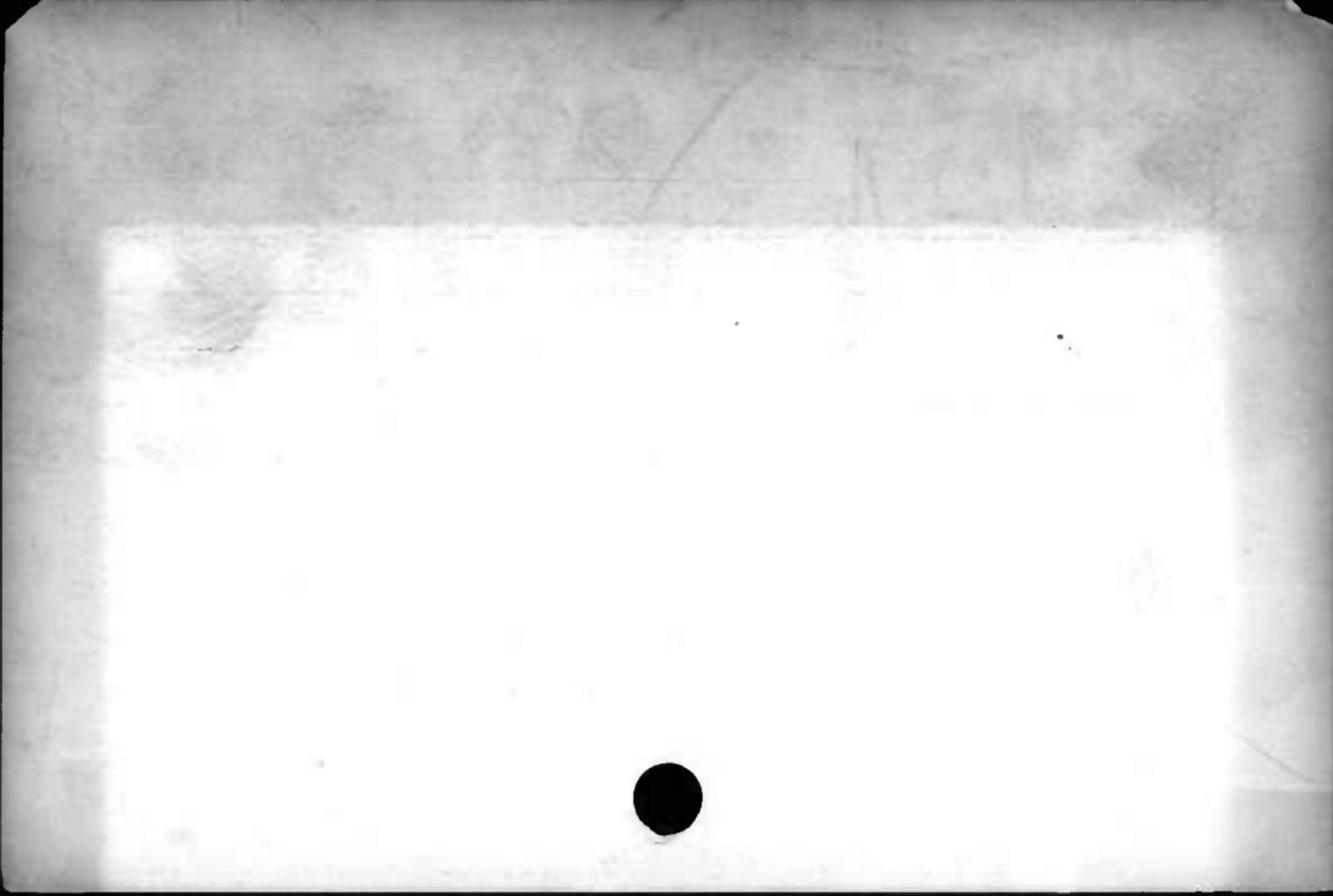
yes

Signature of
Physician

Address

Hugh Steele
Cambridge and

Accident or Suicide?



Lillian M. Conner ✓

Town

Cambridge

County

Dorchester

MARYLAND

Died at

Month

Day

Y.

M.

D.

Native of

Occupation

Date 1902

Sept. 4

Aga

1

9

1

Md.

Male

White

Married

Widow

Divorced

Female

Colorado

Single

Widower

Number of children living

Husband
of

Wife

Father's
Name

Mother's

Maiden Name

Lillian M. Conner

Cause of

Primary

Acute enterocolitis

How long sick

4 weeks -

Death

Immediate

105

Accident, Suicide, Homicide

Reported by

Wilbur G. Drake, M.D.

Address

Cambridge

Dorchester Co.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



<i>Lewis Lewis</i>								
Died at	^{Town} <i>Taylor's Island</i>	^{County} <i>Dorchester</i>				^{MARYLAND}		
Date 1902	Month <i>Sept.</i> Day <i>20th</i>	Y. M. D.	Native of <i>Maryland, Motonmane</i>		Occupation			
Male	White	Married	<u>Widow</u>	<u>Divorced</u>				
Females	<u>Colored</u>	<u>Singl^e</u>	<u>Widower</u>	Number of children living <i>none</i>				
Husband of Wife	<i>Noch</i>							
Father's Name	<i>Lewis Lewis</i>	Mother's Maiden Name	<i>Emily A. Sterling</i>					
Cause of Death	Primary <i>Cerebral Hemorrhage</i>	Immediate	How long sick <i>2 days</i>					
Reported by	<i>R. L. Smithson Jr.</i>							
Address	<i>Church Creek, Md.</i>							

Dr. R. L. Smithson Jr.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Malthen Lecktyl

Died at	Town	County	MARYLAND	
	Cambridge	Dorchester		
Date 19	Month Day	Y. M. D.	Native of	Occupation
or	Sept 11	34	Austria	Farmer
Male	White	Married	Widow	Divorced
Female	Colored	Single	Widower	Number of children living

Husband of

Wife

Father's Name

Iro Lecktyl

Mother's
Maiden Name

Kensie Schiller

Cause of

Primary Cataract Bronchitis

How long sick

several years.

Death

Immediate Heart failure

~~Accident, Suicide, Homicide~~

Reported by

Dr Golombok

92

Address

Cambridge Ma



Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Joseph N. LeCompte ✓

Certificate of Death

Died at Vincent			Town	County Baltimore			MARYLAND
Date 19	Month 02	Day	Y. 52	M. 6	D. +	Native of Maryland	Occupation Baker
Male	White		Age	Married	Widow	Divorced	
Female	Colored			Single	Widower		Number of children living 8
Husband of Jermaine Hurley							
Wife							
Father's Name Solomon Jones				Mother's Maiden Name Kennetha Nichols			
Cause of Death Paralysis				How long sick do			
Primary				16			
Immediate				Accident, Suicide, Homicide			

Reported by

J. S. Ewelle, M.D.Address **Vincent, Md.**

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Mildred Anotis Light

Town

County

Cambridge Dorchester

MARYLAND

Died at

Month Day

Y. M. D.

Native of

Occupation

Date 1902

9 F

5-17

Mt

Child

Mother

White

Age
Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband
of

Wife

Father's
Name

Alex Light

Mother's

Maiden Name

Annie Hughes

Cause of

Primary

Whooping Cough + Pneumonia

How long sick

3 days

Death

Immediate

Heart Failure

Accident, Suicide, Homicide

Reported by

E. E. Wolff, M.D.

8

Address

Cambridge Md.



Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Thomas Stinson Melvin

Town

County

MARYLAND

Died at

Frederick

Dorchester

Month Day

Y. M. D.

Native of

Occupation

Date 1902

Sept 20

Age 14. 1 11

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband
of

Wife

Father's
Name

Mother's

Maiden Name

Cause of

Primary

How long sick

Death

Immediate

2 days

Accident, Suicide, Homicide

Reported by

J. A. Steafair

Address

Frederick



Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Frances May Moore

Town

County

MARYLAND

Died at Post Kromarkt Undertaker

	Month	Day	Y.	M.	D.	Native of	Occupation
Date 1932	Sept	23	Age	10	10	Md	
Male	White		Married			Divorced	
Female	Colored		Single			Widower	Number of children living

Husband
of

Wife

Father's

Name

Rev. F. Moore

Mother's

Maiden Name

Sister E. Hansen

How long sick

Cause of

Primary

Morbus Pneumonoid

3 days

Death

Immediate

Son Father to mother

Accident, Suicide, Homicide

Reported by

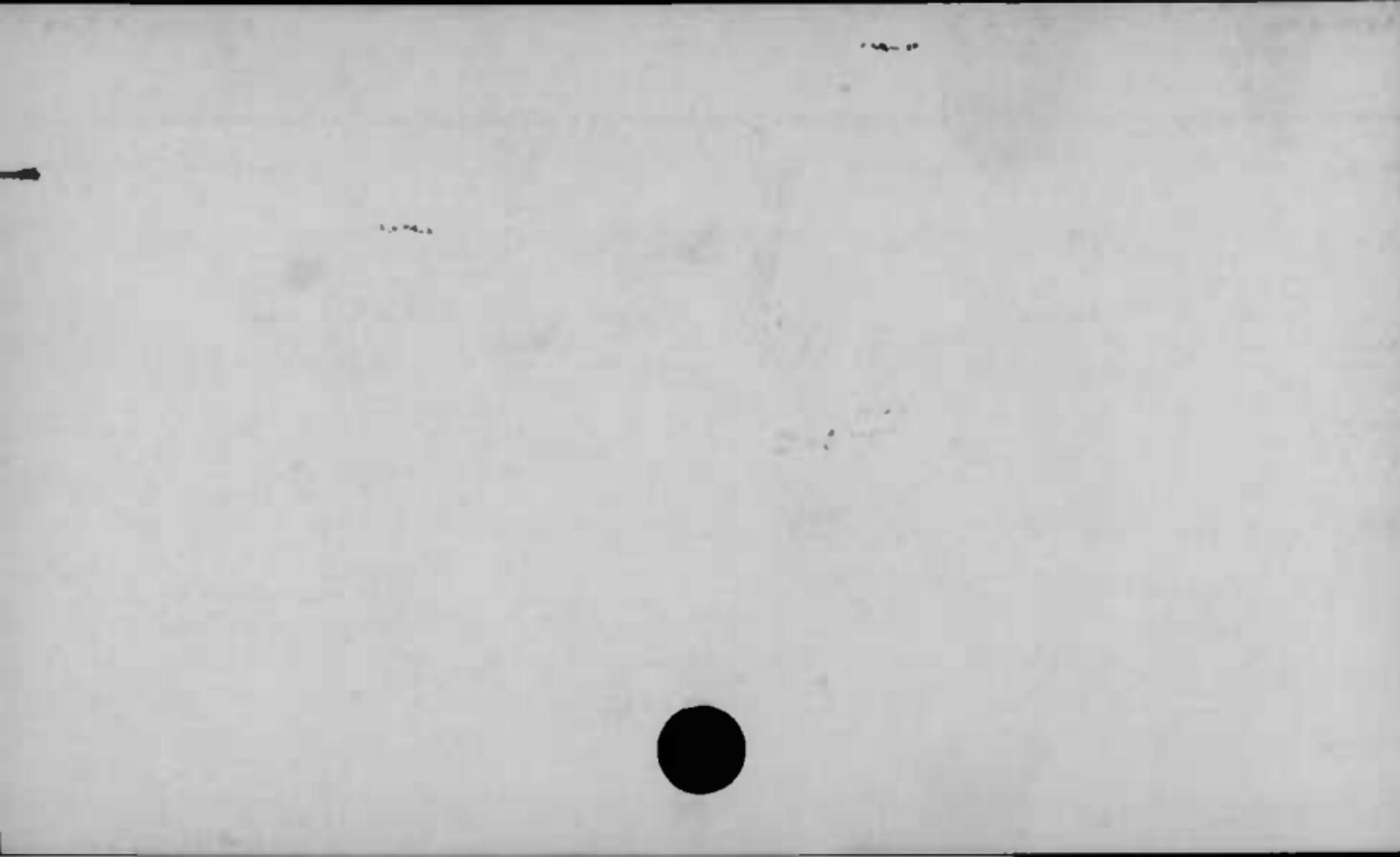
Victor S. Litch

93

Address

Post Kromarkt

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Jos H Peters

Died at <u>near</u>	Town <u>Cambridge</u>	County <u>Dorchester</u>	MARYLAND
Date 19 <u>or</u>	Month <u>Sept</u> Day <u>27</u>	Y. <u>9</u> M. <u>51</u> D. <u>0</u>	Native of <u>St. Louis Mo</u>
Male	White	Age <u>Married</u>	Occupation
<u>Female</u>	<u>Colored</u>	Single	<u>Widow</u> <u>Divorced</u>
Husband of			Number of children living

Wife
Father's
Name

Jos H Peters

Mother's
Maiden Name

Mary E Taylor

How long sick

Cause of Death { Primary Selarus neonatorum
Death Immediate Exhaustion

Accident, Suicide, Homicide

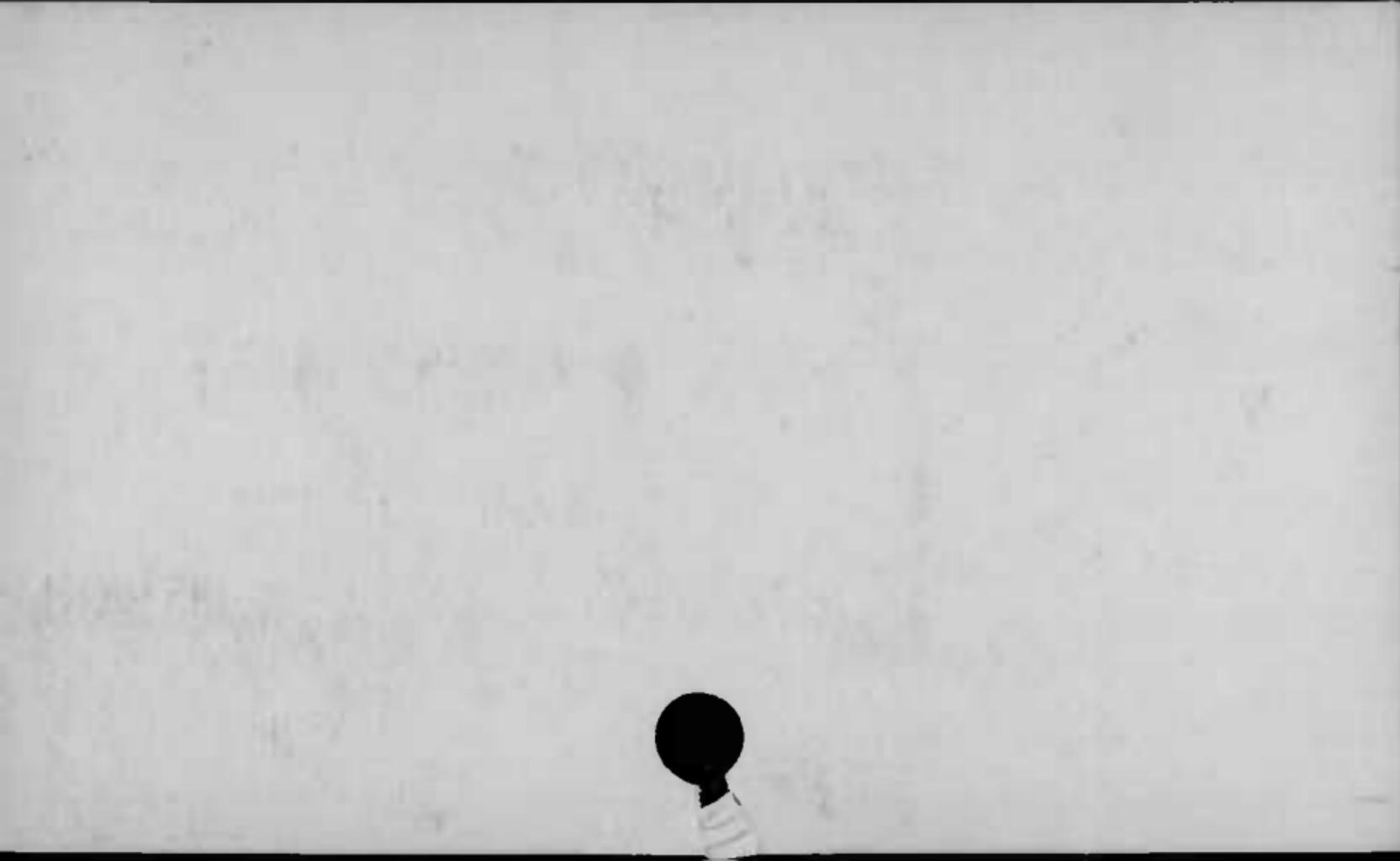
Reported by

Dr. Goldsmith MD 72

Address

Cambridge Ma

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Winnie M. Pettit

Town

Golden Hill

County

Dorchester

MARYLAND

Died at

1902

Month

Day

Y.

M.

D.

Native of

Sept. 24

Age

about 40 years

Dor. Co.

Occupation

Date

189

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

One

Husband

of

A. O. Pettit

Wife

Father's

Name

Charles Shenton

Mother's

Name

Maggie Shenton

Cause of

Primary

Tuberculosis

How long sick

about a year

Death

Immediate

Accident, Suicide, Homicide

Reported by

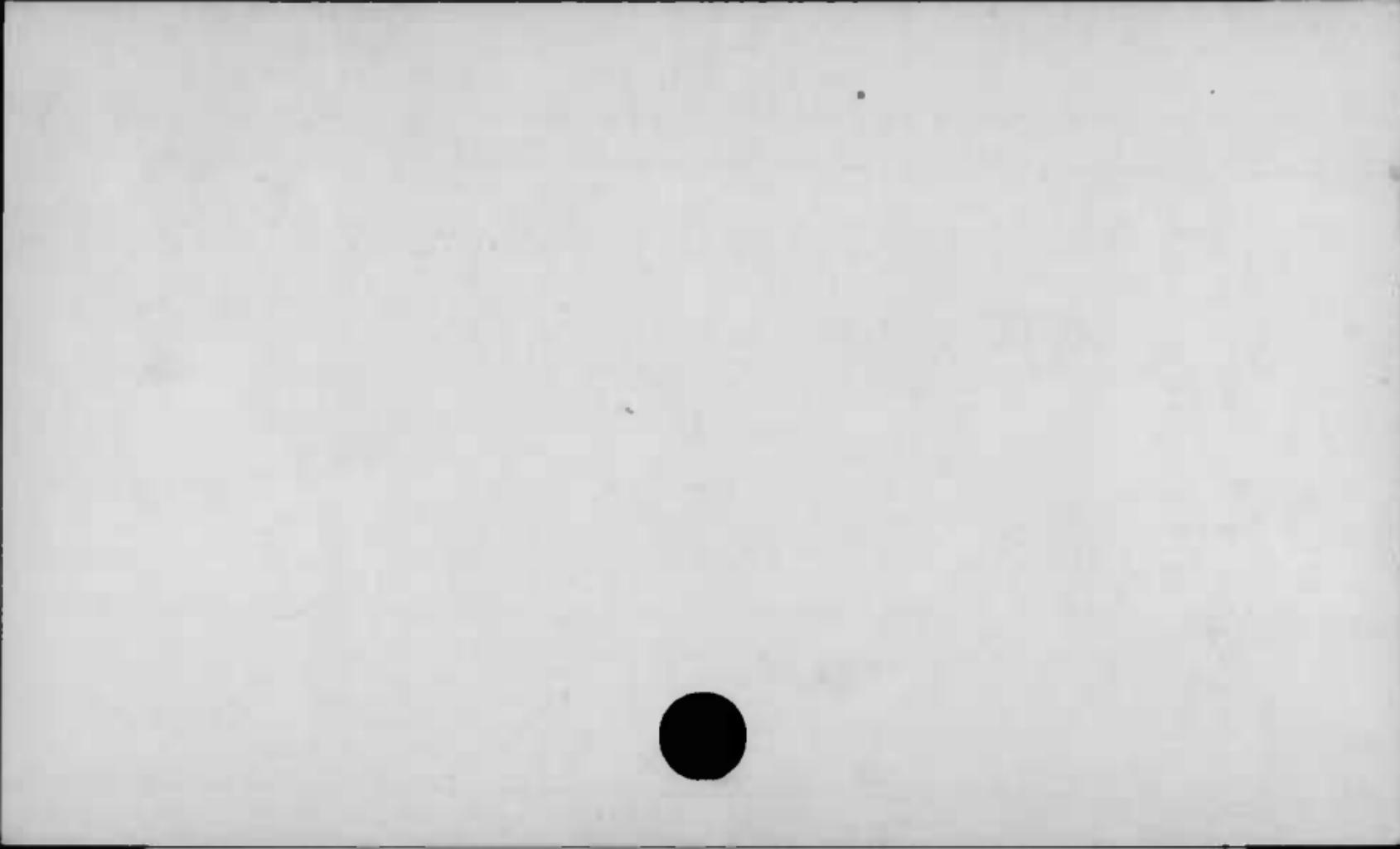
B. L. Snick M.D.

Address

Madison

Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Benjamin H. Reid

Town

County

Died at Cambridge Chesapeake

MARYLAND

Date 1902

Month Day

Y. M. D.

Native of

Occupation

Male

White

Age 52 3

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

2

Husband

of Lepisay Bramble

Wife

Mother's

Father's

don't know

Maiden Name

Name

don't know

How long sick

Cause of

Primary

Death

Immediate

Accident, Suicide, Homicide

Reported by

Address

Spasmodic Typhoid

J. H. Weber
Vienna Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Hilda Jane Richardson

Town

County

Died at

Cummerville, Va.

MARYLAND

Date 19

02

Month Day

Y. M. D.

Native of

Occupation

MW

Age

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

9

of

Mrs Richardson

Wife

Father's

Name

Cause of

Primary

Violated

50

How long sick

5 days.

Death

Immediate

Coron

Accident, Suicide, Homicide

Reported by

S A Stokes

M. B.

Address

Cummerville

Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Harrison Ried

Died at <u>Draubridge</u>			County <u>Baltimore</u>	MARYLAND
Month <u>02</u>	Day <u>Sept</u>	Y. M. D.	Native of <u>Baltimore</u>	Occupation <u>Farm</u>
Date 19 <u>19</u>	<u>Sept</u>	<u>59</u>	Widower	Divorced
Male	White	Age <u>59</u>	Number of children living <u>12</u>	
Female	Colored	Married	Widower	
Husband of	<u>Widower</u>			
Wife				
Father's Name	<u>Don't know</u>	Mother's Maiden Name	<u>Don't know</u>	
Cause of Death	Primary <u>Spasmodic Typhoid</u>			How long sick <u>4 week</u>
	Immediate	<u>No</u>	Accident, Suicide, Homicide	

Reported by

S. S. Everett, M.D.

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Mrs Robinson

Town		County				
Died at	Cambridge		Worcester		MARYLAND	
Date	Month	Day	Y.	M.	D.	Native of
1902	Sept	1	Age	20-11		Delaware More
Mate	White	Married	Widow	Occupation		
Female	Colored	Single	Widower	Number of children living		
Husband of						
Wife						
Father's Name	John R. Robinson			Mother's Name	Mary E. Robinson	
Cause of Death	Primary <u>Typhoid Fever.</u> Immediate <u>Exhaustion</u>			How long sick <u>12 days</u> Accident, Suicide, Hernioids		
Reported by	Dr G. W. Hanby					
Address	Cambridge MD					

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



William Hutson Robinson ✓

Town

County

Died at

Puddolle

Hobkster

MARYLAND

Date 1902

Month Day

Y. M. D.

Native of

Male

White

Married

Widow

Female

Colored

Single

Widower

Divorced

Occupation

Farmer

Number of children living

7

Husband of

Rose Ann Robinson

Father's Name

Hutson Robinson

Mother's

Maiden Name

Priscilla Robinson

Cause of

Primary

Cystitis

How long sick

Death

Immediate

Heart-failure 123

2 year

Accident, Suicide, Homicide

Reported by

G. A. S. Jones

Address

Lynn

Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Baby Edward

Town	County	MARYLAND
Cumhage	Dorchester	
Month	Y.	Native of
Sept	1892	Md.
Day	M.	Occupation
25	4	baby
Age	D.	
Married	Widow	
Male	Widower	
Female	Divorced	
White	Number of children living	
Colored		
Single		

Husband of —

Wife

Father's Name

William Edward

Mother's Name

Ellie Edward

Cause of Death

Primary

Cholera infantum

How long sick

Immediate

1 month

Accident, Suicide, Homicide

Reported by

John Moore

105

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Gronville A Seward.

Died at Hudson Town County MARYLAND
bvr.

Date <u>1812</u>	Month <u>Sep-</u>	Day <u>2</u>	Y. -	M. /	D. -	Native of <u>bvr.</u>	Occupation <u>infant</u>
Male	White	Age <u>Married</u>	Widow	Divorced			
Female	Colored	Sing.	Widower	Number of children living			

~~Husband~~
~~of~~
~~Wife~~

Father's
Name

Thos. W. Seward

Mother's
Name

Auranda Seward.

Cause of Primary

Jaundice

How long sick

1 mo

Death Immediate

Marasmus.

151

Accident, Suicide, Homicide

Reported by S. A. Shultz

Mr

Address Gronville

Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name
in
Full

CERTIFICATE OF DEATH

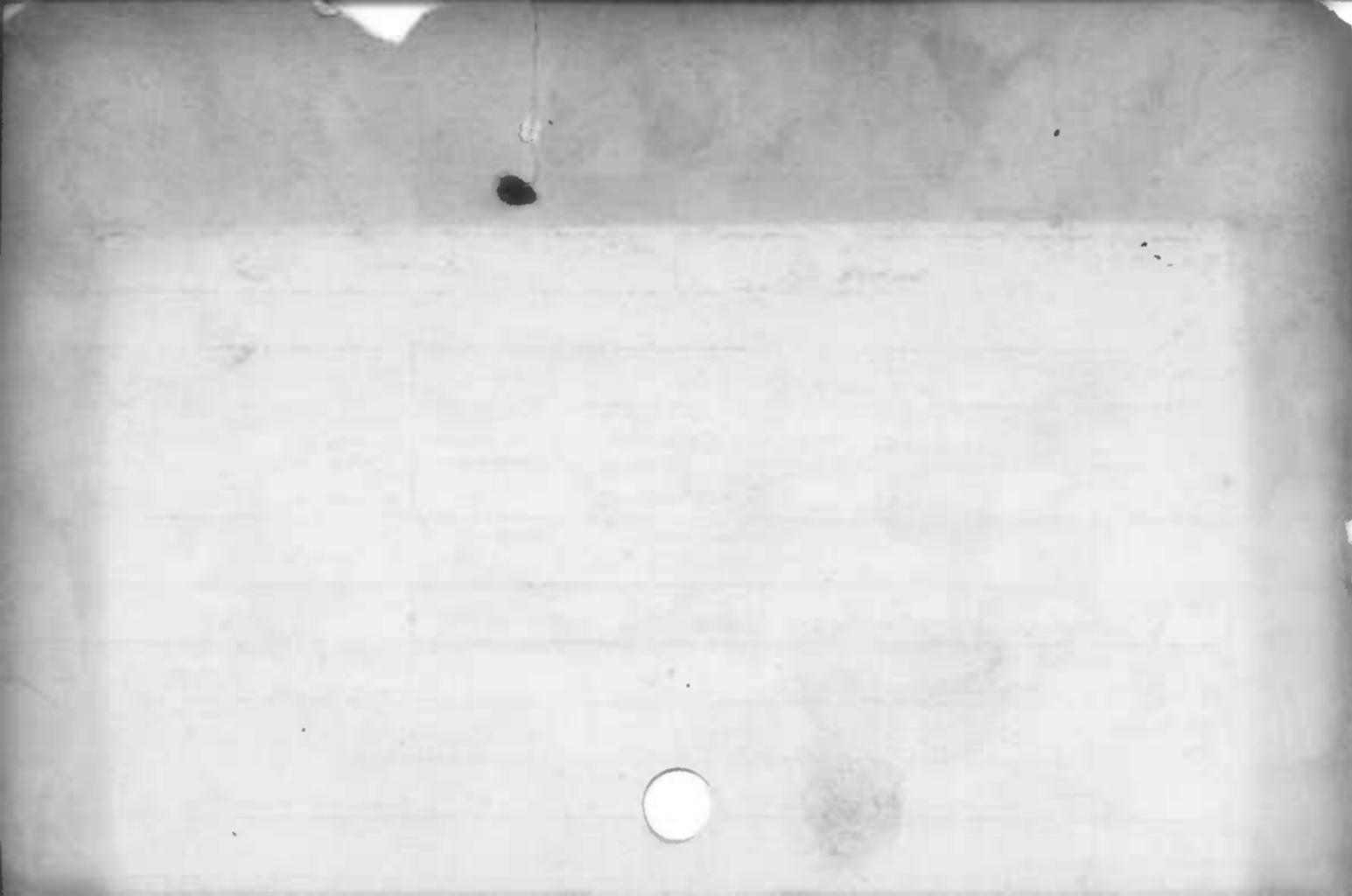
To BE ANSWERED BY
NEAREST FRIEND

Died at	Town	County	MARYLAND
Date of death 190	Month	Day	Years Months Days
of death 1902	Sept	2	Age — — 8
Sex	Color or Race	Occupation	Birth-place
Married, Single or Widowed	Single	—	near Cambridge
Name of Wife or Husband			
Father's Name	Will Sharp	Father's Birthplace	Mad
Mother's Maiden Name	Coraline Farrow	Mother's Birthplace	Mad
Name of person giving information	Will Sharp	How related to deceased	Father

CAUSES OF DEATH

Primary	Six months child	151	How long	2
Immediate	Inanition		How long	8 days
Are the name, age, sex, color, date and place correctly given above?	Yes	Signature of Physician	Address	Henry Steele Cambridge Md
Accident or Suicide?				

PHYSICIAN
OR CORONER



Name in Full

Certificate of Death

<i>James H. Smith</i>						<i>✓</i>		
Died at	Town	Month	Day	Y.	M.	D.	Native of	MARYLAND
Date 19	<i>Sept 21</i>			<i>61</i>	<i>4</i>	<i>15</i>	<i>md</i>	<i>Buckport</i>
Male	White	Age	Married	Widow	Occupation			
Female	Colored		Single	Widower			Number of children living	
Husband of	<i>Alexina Smith</i>							
Father's Name	<i>James Smith</i>	Mother's Maiden Name	<i>Elizabeth A Lewis</i>					
Cause of Death	Primary	<i>Smokers Aunt Prostitution</i>						How long sick
Deeth	Immediate	<i>Abort Fairless</i>						2 months
Reported by	<i>Victor Hitch</i>							
Address	<i>East Newmarket</i>							
nd								

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Infant Thiel

Town
Mechin's Neck

County

Died at

Dorchester

MARYLAND

Date 1902 Month Day

Y. M. D.

Native of

Occupation

Sept. 7

Age —

1

—

Male White

Married

Widow

—

Father Colored

Single

Widower

—

Husband —

Number of children living

—

Wife —

Father's —

Name —

Paul Thiel

Mother's Maiden Name

Camelia Schubert

Cause of Primary

Death Immediate

Atelectasis

How long sick

Asphyxia (5)

1 day

Reported by Dr. J. R. Shives, Jr.

Address Taylor Island Dor. Co. Md.

Accident, Suicide, Homicide

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

11



Maryann J Thomas
Died at Loyds

County

Bar

MARYLAND

Died at Town
Loyds Month Day
Date 1902 Sept 23 Age 60

Y.

M.

D.

Native of
bar.

Occupation

Housewife

Male

Month

Day

Female

White

Colored

Married

Single

Widow

Divorced

Widower

Number of children living

4

Husband of

Wife

Father's Name

Emory Cook. Mother's Maiden Name Matilda Cook

Cause of Death

Primary

Typhoidal fever

How long sick
1 mo.

Death

Immediate

Accident, Suicide, Homicide

Reported by

S A Stolus

m b

Address

Cornersville

md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Millic Thompson

Town

County

Died at

MARYLAND

Vienna Stockesby

Month Day

Y. M. D.

Native of

Occupation

Date 1902

9. 25

Age 73

Md.

Housewife

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

1 son

Husband of

Bill Thompson

Wife,

Mother's

Father's

Maiden Name

Name

Primary

Diseases complicating pregnancy

How long sick

7 hrs

Death

Immediate

Apoplexy

Accident, Suicide, Homicide

Reported by

G. W. Fairman

MD

Address

Vienna

MD

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Eliza Jane Travers

Town

Taylor's Island

County

Dorchester

Died at

MARYLAND

Date

1802

Month

Sept.

Day

21

Y.

M.

D.

73, 6,

Native of

Dor. Co. Md.

Occupation

Housewife

~~Male~~

White

Age
~~Married~~

Widow

~~Divorced~~

Female

~~Colored~~~~Single~~

Widower

Number of children living

3

Husband
of

Levi D. Travers

Father's
Name

Wm. D. Travers

Mother's
Name

Eliza Travers

Cause of

Primary

Cancer of uterus.

How long sick
about two years

Death

Immediate

Accident Suicide Homicide

Reported by

B. L. Smith M.D.

Address

Madison

Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Ezekiel Waller

Town

County

MARYLAND

Died at

*Colorado**Baltimore*

1702

Month

Day

Y.

M.

D.

Native of

Date 189-

Occupation

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

3

Husband

of

Sarah Waller

Father's

Name

Mother's

Caroline

Cause of

Primary

Cancer

How long sick

months

Death

Immediate

Starvation

45

Accident, Suicide, Homicide

Reported by

CR Osborn

Address

Galstownd

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

John H. Frost

Certificate of Death

Died at	Town	County	MARYLAND
	baltimore	Baltimore	
Date 19	Month	Day	Native of
	Sept	14	Fine mouth
	Male	Age	Occupation
		Married	
	Female	Single	Widow
			Divorced
	Colored		Number of children living
Husband of			
Wife			
Father's Name	John Zell	Mother's Maiden Name	Justa Zell
Cause of Death	Primary	How long sick	
	Immediate		Day
Reported by	was "dying" when called		
Address	Wasatch		Accident, Suicide, Homicide
Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.			



Eunice Elizabeth Whaples

Town Cambridge County Dorchester MARYLAND

Died at

Date 1902

Month

Day

Y.

M.

D.

Native of

Md

Occupation

Child

Male

White

Married

Widow

DivorcedFemale

Colored

Single

Widower

Number of children livingHusband
of

Wife

Father's

Name

Chas. Wesley Whaples

Mother's

Maiden Name

Ruby Simmons

Cause of

Primary

Enter. Colitis

How long sick

2 months

Death

Immediate

Exhaustion.

Accident, Suicide, Homicide

Reported by

E. S. Wolff M.D.

106

Address

Cambridge



Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



William F. Williamson

Town

County

Died at

East Bromley Street
Baltimore

MARYLAND

Died at	Month	Day	V.	M.	D.	Native of	Occupation
Date 1902	Sept 29		Age 33	/	/	Md	Miller
	Male	White	Married	Widow	Divorced		
	Female	Colored	Single	Widower		Number of children living	/

Husband of
Wife William Williamson

Father's Name A. W. Williamson Mother's Maiden Name Mary J. Fletcher

Cause of Death Primary Malignant Tumored Tissue, Prostate 6 weeks
How long sick
Death Immediate Abortive

Accident, Suicide, Homicide

Reported by Victor S. Gitch

Address East Bromley Street

Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Joseph W. Woolford
Town Madison County Dorchester

MARYLAND

Died at

Date 1902

Month Day

Y. M. D.

Native of

Apr. 21st - Age 67-6-21 Maryland Carpenter

Male

White

Married

Widow

Divorced

Female

Colon

Single

Widower

Number of children living

4

Husband of

Eliza Ann Bell

Wife

Mother's

Charles Woolford Maiden Name Nancy Jones

Father's Name

Primary Hemiplegia

How long sick

12 days

Cause of Death

Immediate Asphyxia

W

Accident, Suicide, Homicide

Reported by

R. C. Smithson MD

Address

Church Creek, Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

